PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patant and Tradomark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwirk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION SEE DETERMINATION.													
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											Application or Docket Number		
CLAIMS AS FILED - PART ((Cotumn 1) (Cotumn 2)									SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA							1	2		1			
BASIC FEE (37 CFR 1.16(a))									RATE	.380	ł	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))			45	minus 20 ·) 5	1	 9	1000	OR	18	760
INDEPENDENT CLAIMS (37 CFR 1.16(b))			3	minus 3 · ·			2		39		OR	× \$_1() =	450
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	x <u>s 27</u> s	<u> </u>	OR	× 8_//>=	<u>·</u>		
" If the difference in column 1 is less than zero, enter "0" in column 2.								J	*****		OR	+:260-	1210
CLAIMS AS AMENDED - PART II									TOTAL		OR	TOTAL	1210
سے				ENDE) - PAI	KIII							
5		CLAIMS HIGHEST (Cotumn 3)							SMALL E	NTITY	OR	OTHER SMALL	R THAN ENTITY
AMENDMENT A		REA	AAINING FTER NDMENT		PREV PAIL	MBER MOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
\$	(D7 CFR 1.16(c))		37_	Minus		15	Ξ		X \$=		OR	X \$ =	766
Ψ	(27 CFR 1.16(b))	<u> </u>	<u>3_</u>	Minus		3	=		X \$=		OR	X \$ =	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+5 =		OR	+5 =	
	1 11 00								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
1-16-07 (Column 1) (Column 2) (Column 3)											•	~	
AMENDMENT B		REM AF	AIMS AINING TER IDMENT		PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(4)	1.3	.7	Minus	<u>" </u>	5	* /		x:25.		OR	x . 5.0 .	FEE /
MEN	tridependent (SFCFR 1.16(b))		3	Minus	· 3	3	-/	ı	x s /00 =	/	OR OR	x 200.	_/_
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+./80.	/	OR	+.360.	-/ -
								٠	TOTAL ADD'L FEE	/	OR I	TOTAL ADD'L FEE	/
_		(Catu				ımn 2)	(Column 3)	_				_	
ENTC		REMA AF AMEN	UMS UNING TER DMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
흴	Total (37 CFR 1.15(c))	•		Minus	**		=	ſ	x s=		OR	X 8 =	FEE
AMENDM	Independent (37 CFR 1.16(b))	•		Minus	***			Ī	x s =		OR	X 5 =	
₹	FIRST PRESENTATION OF MILETIPLE DEPENDENT CLAIM. (17 CER A 46/0)								+: =	·	. [
									TOTAL ADD'L FEE		OR [TOTAL	
•	If the entry in co If the "Highest N	fumber F	ess than reviously f	the entry Paid For	in colum IN THIS	in 2, write SPACE M	"O" in column 3				OR	ADD'L FEE	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Signest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the IUSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form anxior suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.